

BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	S. H	60245	1-4-97
O.I.P.E. CLASSIFIER		15	1-2-97
FORMALITY REVIEW	Gen	64850	9-86-96

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral).... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	17	17	1/16/97
2	16	16	1/16/97
3	15	01	1/16/97
4	14	01	1/20/97
5	13	02	1/23/97
6	12	03	1/23/97
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If more than 150 claims or 10 actions  
staple additional sheet here

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